

Results of clinical, laboratory and haemorheological investigations of the use of pentoxifylline in high doses.

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A study was carried out in 127 patients (94 males and 33 females) presenting with arteriosclerosis (88 patients) or diabetic vasculopathy (39 patients) in different stages of severity (Fontaine) to assess the effectiveness and tolerance of treatment with high doses of pentoxifylline. Patients received a daily dosage of 2200 mg, given as 800 mg orally and 300 mg by intravenous infusion in saline twice daily, for a mean period of 15.8 days. Relevant clinical parameters were assessed and measurements made of biological and laboratory indices before and after treatment. The results showed that intermittent claudication was improved in 52.4% of the arteriosclerotic and 50% of the diabetic patients. Stage II disease: pain at rest disappeared in 64% and 78% of patients in Stage III, respectively, and trophic lesions in Stage IV patients were reduced or became less clearly marked in 47% and 44%, respectively. Arterial blood pressure, recorded on the tibial arteries using Doppler ultrasound, showed a mean increase of 18%, but significant changes in blood flow were evident from rheographic examination. Whole blood erythrocyte filtration time was reduced by a mean of 8%. The mean changes in the biological indices after treatment were decreases in haematocrit, mean corpuscular volume and blood fibrinogen values, but these were not statistically significant. The other variables showed little if any change. Side-effects initially reported by the patients consisted of headache, nausea,

sweating, pruritus and general malaise, and were mainly associated with the infusion time and regressed in most cases when this was extended.

PMID: 3602022 [PubMed - indexed for MEDLINE]